

Utah Department of Environmental Quality

Division of Drinking Water

Monitoring Schedule

Run Date:
08/04/2011 12:23 pm

PWS ID: UTAH18134 **Name:** MOUNT AIR SUBDIVISION

Legal Contact: MT AIR WATER CORP **Rating:** Approved
DEAN CHRISTENSEN **Rating Date:** 04/09/1996

Address: 943 NORTH MAIN ST **Activity Status:** Active
CENTERVILLE, UT 84014

Phone Number: 801-673-4233

City Served (Area):

County: SALT LAKE COUNTY

System Type: Non-community **Last Inv Update:** 06/30/2011 **Avg Daily Prod:**

Activity Status Cd: Active **Last Snty Srv Dt:** 06/24/2010 **Total Dsgn Cap:**

Population: 68 **Surveyor:** PETER T KEERS **Total Emerg Cap:**

Oper Period: 5/1 to 9/30

Gal/Day Gal/Min

Total Coliform Rule Monitoring

Sample Count	Sample Type	Sample Frequency	Effective Begin Date	Effective End Date	Seasonal Start	Seasonal End	Analyte Name
1	Routine	Quarterly	04/01/2011		5/1	9/30	COLIFORM (TCR)

Additional Monitoring Requirements

(The Sample Label is not correct for Disinfection Byproducts, TOC, TOC Alkalinity, and any triggered groundwater samples)

Facility ☐ ID ☒ Facility Name

Sample Count	Sample Type	Sample Frequency	Last Sample	Next Sample Between
WS001	MT. AIR WELL	Activity Status: A	Sample Label: UTAH18134	WS001 WS001
	NITRATE	1 Routine Year	10/14/2010	01/01/2011-12/31/2011
	SULFATE	1 Routine 9Y	08/08/2003	01/01/2011-12/31/2019